

NOV 28 2005

DOCKET NO. SC13151TP

| | | |
|---|--|----------------------------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number: SC13151TP |
| In re Application of | Toni D. Van Gompel et al. | |
| Application Number | 10/737,115 | Filed December 16, 2003 |
| For | METHOD AND APPARATUS FOR ELIMINATION OF EXCESSIVE FIELD OXIDE RECESS FOR THIS Si SOI | |
| Group Art Unit | 2812 | Examiner Scott B. Geyer |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application. | | |
| The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired): | | |
| <input type="checkbox"/> | One Month (37 CFR 1.17(a)(1)) | \$ 120.00 |
| <input checked="" type="checkbox"/> | Two Months (37 CFR 1.17(a)(2)) | \$ 450.00 |
| <input type="checkbox"/> | Three Months (37 CFR 1.17(a)(3)) | \$ 1020.00 |
| <input type="checkbox"/> | Four Months (37 CFR 1.17(a)(4)) | \$ 1590.00 |
| <input type="checkbox"/> | Five Months (37 CFR 1.17(a)(5)) | \$ 2160.00 |
| <input type="checkbox"/> | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____ | |
| <input type="checkbox"/> | A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> | Payment by credit card. Form PTO-2038 is attached. | |
| <input checked="" type="checkbox"/> | The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input type="checkbox"/> | The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 503079, Freescale Semiconductor, Inc. | |
| <input type="checkbox"/> | I have enclosed a duplicate copy of this sheet. | |
| I am the: | | |
| <input type="checkbox"/> | Applicant/inventor | |
| <input type="checkbox"/> | Assignee of record of the entire interest. See 37 CFR 3.71. | |
| <input checked="" type="checkbox"/> | Attorney or agent of record (Registration No.: | 34,291) |
| <input type="checkbox"/> | Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) | |
| <u>11/28/05</u> | | <u>Michael J. Balconi-Lamica</u> |
| | | Signature |
| | | Michael J. Balconi-Lamica |
| | | Type or printed name |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | |
| <input checked="" type="checkbox"/> | Total of 1 form(s) are submitted | |
| CERTIFICATE OF MAILING | | |
| I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: | | |
| Typed or printed name | Michael Balconi-Lamica | |
| Signature | <u>Michael Balconi-Lamica</u> | |

11/29/2005 AKELECH1 00000020 503079 10737115

01 FC:1252 450.00 DA